

22390 U.S.PTO
10/722823

112603

COMMISSIONER FOR PATENTS
Mail Stop Patent Application
P.O. Box 1450
Alexandria, VA 22313-1450

PATENT APPLICATION
Date: November 26, 2003
File No. 2309.68752

Sir:

Transmitted herewith for filing pursuant to
35 U.S.C. 111(a), is the patent application of

Inventor(s): Norio Kainuma, Hidehiko Kira, Kenji Kobae,
Hiroshi Kobayashi, Katsutoshi Hirasawa, Takatoyo Yamakami,
Masumi Katayama, and Shinji Hiraoka

For: MAGNETIC HEAD TESTER

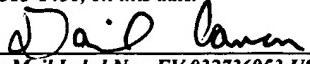
Enclosed are:

- (X) 16 pages of specification, including 10 claims and an abstract.
(X) an executed oath or declaration, with power of attorney.
() an unexecuted oath or declaration, with power of attorney.
() sheet(s) of informal drawing(s).
(X) 4 sheet(s) of formal drawings(s).
(X) Assignment(s) of the invention to FUJITSU LIMITED and Assignment Cover Sheet.
(X) A check in the amount of \$ 40.00 to cover the fee for recording the assignment(s).
(X) Information Disclosure Statement, Form PTO-1449 and cited references.
() Claim for Priority and Priority Document.

11/26/03

Date

Express Mail Label No.: EV 032736953 US



I hereby certify that this paper is being deposited with the United States Postal Service as EXPRESS MAIL in an envelope addressed to: Mail Stop PATENT APPLICATION, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this date.

Preliminary Amendment

- (X) Please insert the following between the title and line 1 of the specification:
"This is a continuation of International PCT Application No. PCT/JP01/06560 filed July 30, 2001."

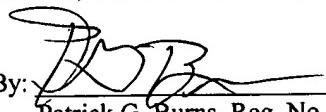
Fee Calculation For Claims As Filed

a)	Basic Fee	\$ 770.00	
b)	Independent Claims <u>1</u> - 3 = _____	x \$ 86.00 = \$ _____	
c)	Total Claims <u>10</u> - 20 = _____	x \$ 18.00 = \$ _____	
d)	Fee for Multiple Dependent Claims	\$ 290.00 = \$ _____	
		Total Filing Fee	<u>\$ 770.00</u>

- () Applicant(s) qualifies as a Small Entity, reducing Filing Fee by half to \$ _____
(X) A check in the amount of \$ 770.00 to cover the filing fee is enclosed.
() Charge \$ _____ to Deposit Account No. 07-2069.
() Other _____
(X) The Commissioner is hereby authorized to charge any additional fees which may be required to this application under 37 C.F.R. 1.16-1.17, or credit any overpayment, to Deposit Account No. 07-2069. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

GREER, BURNS & CRAIN, LTD.


By: Patrick G. Burns, Reg. No. 29, 367

300 South Wacker Drive – Suite 2500
Chicago, Illinois 60606
Telephone: (312) 360-0080
Facsimile: (312) 360-9315
Customer Number 24978